

PART B - FEE(S) TRANSMITTAL

end this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Black 1 for any change of eddress)

52835

7590

09/13/2007

HAMRE, SCHUMANN, MUELLER & LARSON, P.C. P.O. BOX 2902

10/11/2007 FHETEKIZ 00000068 5034/8 10/51134

01 FQ:1501 02 FQ:1504 1440.00 DA 300.00 DA Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Cartificate of mailing or transmission.

Cartificate of Mailing or Transmission

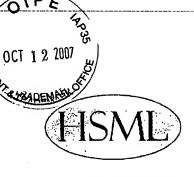
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (57i) 273-2885, on the date indicated below.

Antonette Peters	(Depositor's name)
- Collinson	(Signature)
October 12, 2007	(Deta)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/751,134	12/30/2003	Ryoji Fujii	10873,803USC1	1764

TITLE OF INVENTION: MIXING/CHARGING PORT FOR MEDICAL TREATMENT

APPLN, TYPS	SMALL ENTITY	TXSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUB	DATE DUE	
	I	\$1400	\$300	02	\$1700	12/13/2007	
nonprovisional	NO NO	31400		<b></b>	\$1700	12.13.230	
EXAN	INER	ART UNIT	CLASS-SUBCLASS				
MENDEZ, MANUEL A		3763	604-082000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
		A TO BE PRINTED ON	THE PATENT (print or type	oc)			
PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI JMS CO., LT	GNEE	pietion of this form is NO	data will appear on the port a substitute for filing and (B) RESIDENCE: (CITY HIROSHIMA, JAPA	and STATE OR COUNT		ument has been filed	
lease check the approp	riate assignee category or		rinted on the patent):				
			☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required feo(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3478 (enclose an extra copy of this form				
a. Applicant clain	itus (from status indicate is SMALL ENTITY statu ad Publication [cc (if req	us. See 37.CFR 1.27.	b. Applicant is no long d from anyone other than to coffice.	ger claiming SMALL ENT be applicant; a registered a		***	
Authorized Signature		And a party and Transcription			12, 2007		
Typed or printed nam	<sub>ю</sub> Douglas P. М	lueller	<del></del>	Registration No. 3	0.300		
in application. Confider submitting the complete his form and/or suggest Box 1450. Alexandria, \ Alexandria, Virginia 22:	ntiality is governed by 33 application form to the ions for reducing this but ions for reducing this but virginia 22313-1450. DC 313-1450.	U.S.C. 122 and 37 CFR: U.S.PTO. Time will vary rden, should be sent to the ONOT SEND FEES OR	on is required to obtain or r 1.14. This collection is est of depending upon the individual office COMPLETED FORMS TO	imated to take 12 minutes idual case. Any comment r, U.S. Patest and Traden D THIS ADDRESS. SENI	to complete, memory is on the amount of time bark Office, U.S. Depart D TO: Commissioner for	you require to comp ment of Commerce, I Patents, P.O. Box 14	
Inder the Paperwork Ro	eduction Act of 1995, no	persons are required to re	spond to a collection of inf	ormation unless it displays	s a valid OMB control m	imber.	
*TOL-85 (Rev. 08/07)	Approved for use through	1 Q8/31/2010.	OMB 0651-0033 L	J.S. Patent and Trademark	Office; U.S. DEPARTN	IENT OF COMMER	



## HAMRE, SCHUMANN,

AN INTERNATIONAL INTELLECTUAL PROPERTY LAW FIRM

**FAX TRANSMISSION** 

October 12, 2007

TO:

Mail Stop: ISSUE FEE Examiner: MENDEZ

Commissioner for Patents

PO Box 1450

Alexandria, VA 22313-1450

FROM: Douglas P. Mueller

OUR REF: 10873.0803USC1

TELEPHONE: (612) 455.3800

Total pages, including cover letter:

PTO FAX NUMBER: 571.273.2885

If all pages are NOT received, please call us at 612.455.3800 or fax us at 612.455.3801.

Title of Document:

Part B - Fee(s) Transmittal (1 pg)

Applicant:

**FUJII** 

Serial No.:

10/751,134

App. Filed:

December 30, 2003

Group Art No.: 3763

Conf. No.:

1764

Please charge Deposit Account No. 50-3478 in the amount of \$1400 for Issue Fee and \$300 for Publication Fee. Please charge any additional fees or credit overpayment to Deposit Account No. 50-3478. Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers, if appropriate.

Name: Douglas P. Mueller

Reg. No. 30,300

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on the date shown below.

Antonette C. Peters

Signature